



# Austin/Travis County Health and Human Services Department



*The role of public health is to:*

**PROMOTE** community-wide wellness,

**PREVENT** disease, and

**PROTECT** the community from infectious diseases,  
environmental hazards, and epidemics

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## 1115 Waiver

**Public Health and Human Services Subcommittee**

**March 19, 2013**

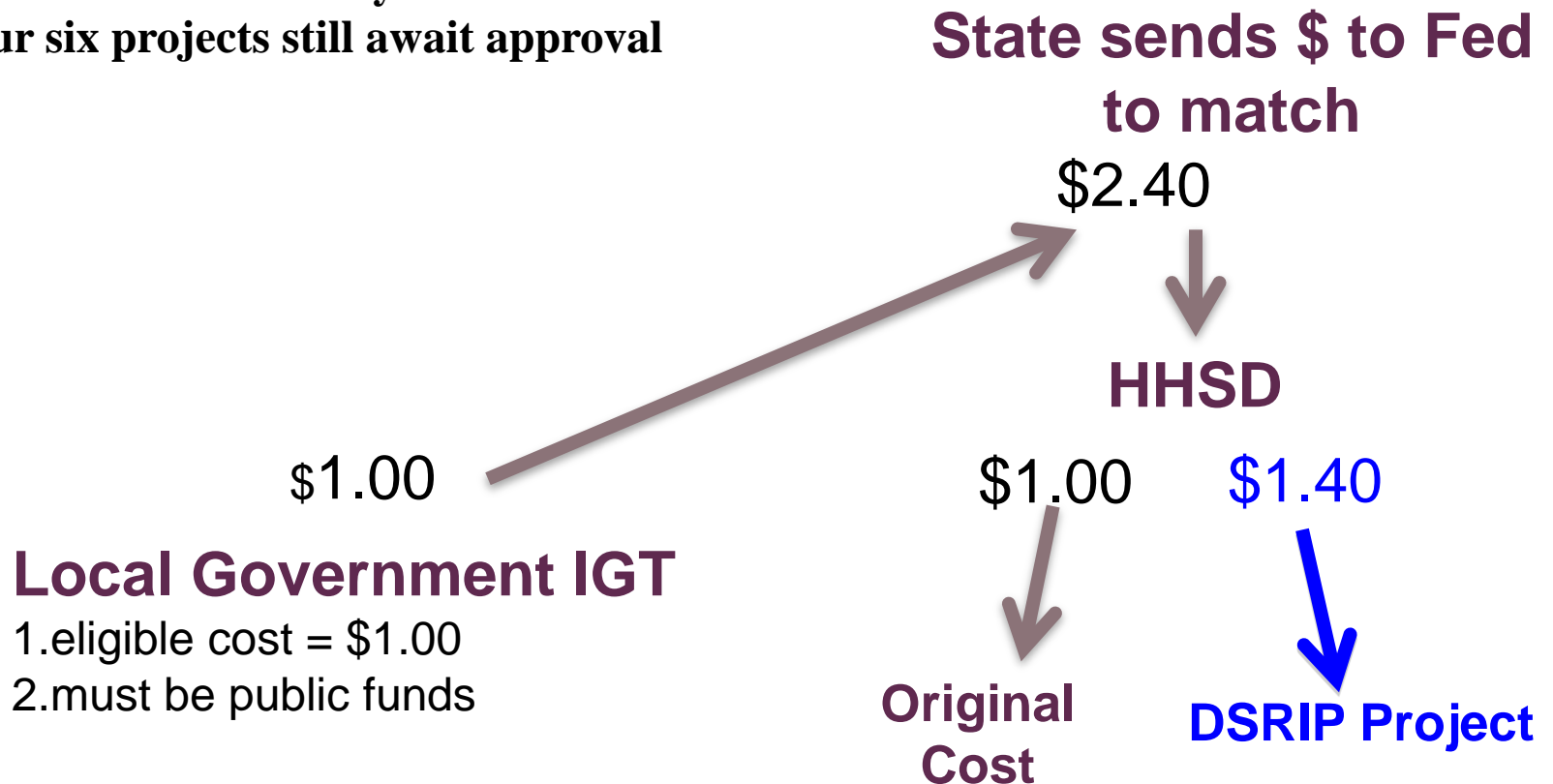
**Carlos Rivera, Director, HHSD**

**Bob Corona, HHSD**

# 1115 Waiver - Background

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- The waiver is a 5-year project
- We are in the second year of the waiver
- Our six projects still await approval



# 1115 Waiver - Region 7 Projects

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## Dell Children's Hospital

- Care for Chronically Ill Children
- Family-centered Pediatric Obesity
- Counseling on AISD Campuses (AISD funded)

## A/TC Integral Care

- MCOT Expansion
- MCOT Telepsychiatry Services
- Crisis Residential program
- Community Behavior Support Team
- Integrated Medical & Behavioral Health Center in Dove Springs
- Chronic Disease Self Management
- Whole Health Peer Support
- Prescriber Expansion
- Mental Health First Aid & Suicide Prevention Training

## Community Care

- Disease Management Registry
- Patient Centered Medical Home Model
- Chronic Disease Management Model
- Expanded Hours at Community Clinics
- Mobile Care Vans
- Gastroenterology at Community Clinics
- Musculoskeletal Care at Community Clinics
- Pulmonology at Community Clinics
- Expanded Dental Services
- Integrated Behavioral Health for Diabetes
- Telepsychiatry at Community Clinics
- Pregnancy Reduction Program
- STD/HIV Screening & Treatment
- Community Paramedic Navigation

## Brackenridge Hospital

- Psychiatric Emergency Department
- Post-Graduate Training for Psychiatric Specialties
- Psychiatric Telemedicine for Emergency Service
- Substance Abuse Care
- Connection & Navigation Behavioral Health Care
- Connection & Navigation Women's Oncology Care Screening
- Women's Oncology Care Navigation
- Adult Diabetes Care
- Chronic Care Management: Adults
- Care Transitions
- Language Access & Resource Center
- Culturally Competent Care Training
- Palliative Care Expansion
- OB Navigator Project

# 1. Healthy Families

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- **Strategy:** Adds an additional unit to Travis County Healthy Families home visiting program
  - National model
  - Intensive child & family services decreasing from Birth to age 3
- **Target Population:** Expectant families or families with newborns that are over-burdened with focus on African-American and Medicaid eligible families
- **Outcomes:** Establish medical home, early prenatal care, improve birth outcomes, well child checks, parenting skills
- **Cost:** \$250,000 per year in a contract with Travis County HHS & VS



## 2. Prenatal/Postnatal

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- **Strategy:** Use Community Health Workers to improve birth and twelve-month postnatal outcomes through increased and improved access to pre- and post-natal care and health literacy, including preconception.
- **Target Population:** Low-income African American and Hispanic families that are expecting or planning a pregnancy.
  - Majority Medicaid eligible and/or uninsured
  - Outreach coordinated with multiple community partners with a focus to recruit African-American families.
- **Outcomes:** Improved birth and postnatal outcomes including reduction in racial/ethnic disparities
- **Cost:** ~ \$530,331 per year



### 3. Community Diabetes Project

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- **Target population:** The target population is African Americans and Hispanics with diabetes. Efforts will additionally target medically indigent and Medicaid eligible persons within the target population.
- **Strategy:** Increase community health workers and/or community-based organizations in the Hispanic and African-American communities that provide culturally appropriate diabetes self-management education.

# 4. Tobacco Prevention & Cessation Program

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- **Target population:** 18-24 year olds with a targeted focus on the 34% of 18-24 year olds living in poverty/indigent. This project will be able to measure the number of Medicaid eligible persons accessing tobacco cessation services.
- **Strategy:** Evidence-based comprehensive tobacco prevention and cessation interventions including:
  - Expanded tobacco-free policies in new settings frequented by 18-24 year olds.
  - Integration of a tobacco-use assessment and cessation referral tool into social service agencies and health care organizations utilized by 18-24 year olds.
  - Implement a new media campaign focused on tobacco prevention and promotion of cessation services targeting 18-24 year olds



## 5. Immunizing High Risk Adults Against Vaccine Preventable Diseases

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**Strategies:** (1) Supplement the DSHS formulary of adult vaccines with HPV, TDAP, Pneumococcal, Hepatitis A, influenza and meningitis, and; (2) Partner with HHSD programs (i.e. STD clinic) and CBOs serving high risk clients to provide vaccine access through outreach efforts.

**Target Populations:** Homeless, men who have sex with men (MSM), women at risk (including pregnant women), substance abusers (including intravenous drugs), LGBT youth, HIV positive individuals and people that smoke.

**Outcome(s):** (1) Establish vaccination collaborations with agencies serving target populations that lack clinical resources, and (2) Provide an estimated 3750 appointments annually to the target populations.

### **Cost:**

Vaccines: ~\$800,000.00

Medical Supplies: ~\$35,000.00

Office Equipment: ~\$8,000.00

One FTE : ~\$85,000.00

Mileage: ~\$8,000.00

**Estimated Total:** ~\$936,000.00



## 6. ACT Team for PSH Residents

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- **Target Population** - ~15 formerly homeless men and women with tri-morbid health conditions living in Housing First (HF) Permanent Supportive Housing (PSH)
- **Cost** - \$250,000
- **Strategy** – Provide an Assertive Community Treatment (ACT) Team for individuals in program in order to help them maintain housing stability and adhere to anti-depressant medication (20% goal) management

# **1115 Waiver - Next Steps**

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## **Approval Process**

- **The RHP 7 plan was submitted to the State on March 11th.**
- **HHSC will send our plan to CMS by early April. Central Health will get an email when this happens.**
- **Once CMS receives the plan, it has 45 days for review. After these 45 days, CMS then lets us know which projects have been approved and which need more work.**
- **We have 30 days to respond to CMS' feedback and submit revised projects.**
- **CMS has 15 days to review revisions and approve or deny projects or plan elements.**
- **This timeline takes us in to late June for final approval from CMS**